

FMCSA Motor Carrier

USDOT Number: **2214605**
Docket Number: **MC222036**
Legal Name: **LOGISTICS MANAGEMENT RESOURCES, INC.**
DBA (Doing-Business-As) Name



Addresses

Business Address: **13853 PERKINS ROAD
BATON ROUGE, LA 70810**
Business Phone: **(225) 755-1388** Business Fax:
Mail Address:

Mail Phone: Mail Fax: Undeliverable Mail: **NO**

Authorities:

Common Authority:	NONE	Application Pending:	NO	
Contract Authority:	NONE	Application Pending:	NO	
Broker Authority:	ACTIVE	Application Pending:	NO	
Property:	YES	Passenger:	NO	Household Goods: NO
Private:	NO	Enterprise:	NO	

Insurance Requirements:

BIPD Exempt:	NO	BIPD Waiver:	NO	BIPD Required:	\$0	BIPD on File:	\$0
Cargo Exempt:	NO			Cargo Required:	NO	Cargo on File:	NO
BOC-3:	YES			Bond Required:	YES	Bond on File:	YES

Blanket Company: **MULTI-STATES AGENT FOR PROCESS, INC.**

Comments:

Active/Pending Insurance:

Form: 84	Type: SURETY	Posted Date: 10/01/2013
Policy/Surety Number: 2409541	Coverage From: \$0	To: \$75,000*
Effective Date: 10/01/2013	Cancellation Date:	

Insurance Carrier: **GREAT AMERICAN INSURANCE CO.**
Attn: **PROPERTY & INLAND MARINE DIVISION**
Address: **580 WALNUT ST.
CINCINNATI, OH 45202 US**
Telephone: **(800) 858 - 8335** Fax: **(513) 287 - 8230**

* If a carrier is in compliance, the amount of coverage will always be shown as the required Federal minimum (\$5,000 per vehicle, \$10,000 per occurrence for cargo insurance, \$75,000 for bond/trust fund insurance for brokers and freight forwarders). The carrier may actually have higher levels of coverage.

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Rejected Insurances:

Form:	Type:	Coverage From:	\$0	To:	\$0
Policy/Surety Number:		Received:	Rejected:		
Rejected Reason:					

Insurance History:

Form: 84	Type: SURETY	Coverage From:	\$0	To:	\$10,000 *
Policy/Surety Number: 520130-11205807		Effective Date From: 10/22/1989	To: 10/22/1997	Disposition: Cancelled	

Insurance Carrier **UNITED STATES FIDELITY & GUARANTY CO.**
 Attn: **PLEASE CONTACT YOUR LOCAL AGENT**
 Address: **ONE TOWER SQUARE, -5GS**
HARTFORD, CT 06183 US
 Telephone: Fax:

Form: 84	Type: SURETY	Coverage From:	\$0	To:	\$10,000 *
Policy/Surety Number: 52013049669974		Effective Date From: 10/22/1997	To: 10/01/2013	Disposition: Replaced	

Insurance Carrier **UNITED STATES FIDELITY & GUARANTY CO.**
 Attn: **PLEASE CONTACT YOUR LOCAL AGENT**
 Address: **ONE TOWER SQUARE, -5GS**
HARTFORD, CT 06183 US
 Telephone: Fax:

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Authority History:

Sub No.	Authority Type	Original Action	Disposition Action
0	PROPERTY BROKER	GRANTED	02/27/1992

Pending Application:

Authority Type	Filed	Status	Insurance	BOC-3

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Revocation History:

Authority Type	1st Serve Date	2nd Serve Date	Reason